U.S. DEPARTMENT OF HEALTH AND HUMAN SERVICES

Public Health Service

Centers for Disease Control
and Prevention (CDC)
Atlanta GA 30333

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Re: Safety to athletic teams, educational groups, and other visitors during a serogroup B meningococcal disease outbreak

Meningococcal disease, which is caused by the bacterium *Neisseria meningitidis*, can be devastating and often – and unexpectedly – strike otherwise healthy individuals. In the United States, the approved vaccine can help protect against four serogroups ("strains"), known as serogroups A, C, Y, and W, but not against B. We recognize that when cases of meningococcal disease occur, there is increased concern about the potential spread of disease and desire to take appropriate steps to prevent additional cases.

Although transmission is from person-to-person, this organism is not highly contagious and requires sharing respiratory and oral secretions to spread. At any given time during an outbreak, very few individuals carry the outbreak strain in their throats. Continued and prolonged interactions among individuals, such as in a household or in a dormitory, allows spread of the bacteria to continue. Therefore, CDC does not recommend canceling or limiting sporting or social events as a preventive measure.

Close, prolonged, or face-to-face contact with someone who has meningococcal disease puts an individual at increased risk. In addition, it is important to define the “population at risk” during an outbreak. For example, in a school outbreak where all the cases are students at the school, we define the population at risk as students at that school. Individuals outside of the outbreak population have a very low risk, even with casual contact such as shaking hands. CDC does not recommend that individuals change their behaviors or actions based on concern about being exposed to individuals in the population at risk.

CDC investigations and the published medical literature have not identified any serogroup B meningococcal disease outbreaks or clusters associated with sporting events. Three clusters of serogroup C meningococcal disease associated with sporting events have been reported. One included 3 cases occurring within 24 hours among high school wrestlers from the same team who competed at a district-level tournament (CDC unpublished data, 1999). No further transmission occurred. Another cluster included 4 cases among spectators at a rugby match, with cases occurring 4 to 5 days after the match[1]. Transmission was sustained in one serogroup C meningococcal disease outbreak, with 11 cases occurring in 4 countries following a youth football tournament[2]. Based on the evidence, the risk is very low of an outbreak spreading due to attendance or participation at a sporting event, especially for serogroup B meningococcal disease.

Additionally, there is no evidence that says you are at risk of catching the infection by touching surfaces like doorknobs or keyboards. A small number of the bacteria may survive for a few hours on surfaces, but most die quickly. However, hand washing and covering your cough or sneeze are good hygiene practices to follow.

Health departments conduct thorough and rapid investigations around each identified suspected case of meningococcal disease. All persons identified as close contacts of a case, such as roommates, housemates, and other persons who may have shared secretions, are given antibiotics to reduce their risk of developing disease. If a person becomes a close contact of someone diagnosed with meningococcal disease, preventive antibiotics will be recommended.

For more information on the signs and symptoms of meningococcal disease, please visit www.cdc.gov/meningococcal.

References

[1]Orr et al. Cluster of meningococcal disease in rugby match spectators. *Commun Dis Public Health*. 2001;4(4):316-8.

[2]Reintjes et al. Detection and response to a meningococcal disease outbreak following a youth football tournament with teams from four European countries. *Int J Hyg Environl Health*. 2002;205(4):291–296.